

Insurance Company \_\_\_\_\_

Company's latest rate level adjustment effective as of \_\_\_\_\_

HAWAII PREMIUM QUOTATIONS

Policy Effective Date: November 1, 2002

Automobile: 2001 Honda Accord, DX, 4-Dr Sedan  
(I.S.O., V.S.R. = 01-7)

Age/  
Symbol \_\_\_\_\_ Model Year \_\_\_\_\_

Classification: Pleasure Use,  
One (1) Driving Under Influence  
With Proof of Financial Responsibility (SR-22)

Primary Rating Factor \_\_\_\_\_  
Secondary Rating Factor \_\_\_\_\_  
SR-22 Rating Factor \_\_\_\_\_

☐ Insurer does not accept NEW applicants with DUI conviction

☐ Insurer does not accept NEW applicants with Administrative License Revocations

	<u>Base Premium</u>	<u>Primary + Secondary Rating Factor</u>	<u>*Other Rating Factor</u>	<u>*Other Rating Factor</u>	<b><u>ANNUAL PREMIUM</u></b>
Territory 01 – Oahu					
\$20,000/40,000 BI	_____	_____	_____	_____	_____
\$10,000 PD	_____	_____	_____	_____	_____
\$10,000 Basic PIP	_____	_____	_____	_____	_____
\$20,000/40,000 UM (S)	_____	_____	_____	_____	_____
\$20,000/40,000 UIM (S)	_____	_____	_____	_____	_____
		(To be reported on summary sheet)		Sub Total:	_____
\$100 Ded Comp	_____	_____	_____	_____	_____
\$500 Ded Coll	_____	_____	_____	_____	_____
				Total:	_____
Territory 03 – Maui					
\$20,000/40,000 BI	_____	_____	_____	_____	_____
\$10,000 PD	_____	_____	_____	_____	_____
\$10,000 Basic PIP	_____	_____	_____	_____	_____
\$20,000/40,000 UM (S)	_____	_____	_____	_____	_____
\$20,000/40,000 UIM (S)	_____	_____	_____	_____	_____
		(To be reported on summary sheet)		Sub Total:	_____
\$100 Ded Comp	_____	_____	_____	_____	_____
\$500 Ded Coll	_____	_____	_____	_____	_____
				Total:	_____
Territory 04 – Kauai					
\$20,000/40,000 BI	_____	_____	_____	_____	_____
\$10,000 PD	_____	_____	_____	_____	_____
\$10,000 Basic PIP	_____	_____	_____	_____	_____
\$20,000/40,000 UM (S)	_____	_____	_____	_____	_____
\$20,000/40,000 UIM (S)	_____	_____	_____	_____	_____
		(To be reported on summary sheet)		Sub Total:	_____
\$100 Ded Comp	_____	_____	_____	_____	_____
\$500 Ded Coll	_____	_____	_____	_____	_____
				Total:	_____
Territory 05 – Hawaii					
\$20,000/40,000 BI	_____	_____	_____	_____	_____
\$10,000 PD	_____	_____	_____	_____	_____
\$10,000 Basic PIP	_____	_____	_____	_____	_____
\$20,000/40,000 UM (S)	_____	_____	_____	_____	_____
\$20,000/40,000 UIM (S)	_____	_____	_____	_____	_____
		(To be reported on summary sheet)		Sub Total:	_____
\$100 Ded Comp	_____	_____	_____	_____	_____
\$500 Ded Coll	_____	_____	_____	_____	_____
				Total:	_____

(S) = stacked

\*Other Rating Factors - Explain: \_\_\_\_\_

Responsible Officer: (Name) \_\_\_\_\_ (Title) \_\_\_\_\_

WORKSHEET D (Address) \_\_\_\_\_